

REGISTERED CRAB RECEIVER (RCR) FEE SUBMISSION FORM

U.S. Department of Commerce/ NOAA
National Marine Fisheries Service
Restricted Access Management
P.O. Box 21668
Juneau, AK 99802-1668
(800) 304-4846 toll free / 586-7202 in Juneau
(907) 586 -7354 fax



BLOCK A – IDENTIFICATION OF RCR

1. Name of RCR Permit Holder:

2. NMFS Person ID:

3. SSN* or Tax ID:

4. All RCR Permit No.'s held by Permit Holder:

5. Business Mailing Address:

6. Business Telephone Number:

7. Business Fax Number:

8. Business E-mail Address (if any):

* **The Debt Collection Improvement Act**, in Section 7701 of title 31, United States Code requires collection of the taxpayer identification (Social Security number or Tax Identification number) from each person doing business with a federal agency. This information is used for purposes of collecting and reporting any delinquent amounts arising out of such person's relationship with the government. This information is also used to verify the identity of the applicant(s) and to accurately retrieve confidential records related to federal commercial fishery permits issued under 50 CFR Part 680.

BLOCK B AGREEMENT WITH CRAB FEE LIABILITY SUMMARY

Check if you agree your Crab Fee Liability Summary represents the actual value of all CR crab received: ☐ YES ☐ NO

If you have checked YES, and have not submitted payment on-line, please date and sign your name where designated in Block D, complete Block E, and mail this Fee Submission Form with your payment in the envelope provided.

If you have checked NO, complete the attached Fee Calculation Worksheet and provide documentation supporting your claimed fee liability. Once you have completed the Fee Calculation Worksheet, return to Block D on page 1 and print, sign, and date the Fee Submission Form, complete Block E, and mail the form with your payment.

BLOCK C -- METHOD OF PAYMENT

1. ☐ Personal Check ☐ Cashiers Check ☐ Money Order ☐ Payment made On-Line

REMINDER! Sign your check and, if paying for multiple permit holders, include their completed/signed Fee Submission Forms. All checks or money orders should be made payable to "National Marine Fisheries Service"

2. ☐ Credit Card: ☐ Visa ☐ Mastercard ☐ American Express ☐ Discover ☐ Novus

Card No: _____ Exp. Date: _____

Amount of Payment: _____ Name as Printed on Card: _____

Signature of Card Holder: _____ Date: _____

(Reminder! Sign your check and if paying for more than one RCR, include all Fee Submission forms.)

<i>BLOCK D – APPLICANT SIGNATURE</i>
Under penalties of perjury, I hereby declare that I, the undersigned, completed this application and that the information contained herein is true, correct, and complete to the best of my knowledge and belief. (If completed by representative, attach authorization)
1. Printed Name of Applicant (if completed by Agent, attach authorization)
2. Signature of Applicant
3. Date:

KEEP A COPY OF THIS FORM, AND ANY ACCOMPANYING DOCUMENTS, FOR YOUR RECORDS

<p style="text-align: center;">INSTRUCTIONS FOR REGISTERED CRAB RECEIVER (RCR) FEE SUBMISSION FORM</p>

BLOCK A – IDENTIFICATION OF RCR

1. Enter name of RCR Permit Holder.
2. Enter the NMFS ID Number of the person listed in Block (1).
3. Enter the SSN* or Tax ID Number of the person listed in Block (1)
4. List all RCR Permit Numbers of held by the person listed in Block (1)

* **The Debt Collection Improvement Act**, in Section 7701 of title 31, United States Code requires collection of the taxpayer identification (Social Security number or Tax Identification number) from each person doing business with a federal agency. This information is used for purposes of collecting and reporting any delinquent amounts arising out of such person's relationship with the government. This information is also used to verify the identity of the applicant(s) and to accurately retrieve confidential records related to federal commercial fishery permits issued under 50 CFR Part 680.

5. Enter Business mailing address of person entered in Block (1).
6. Enter Business telephone number, fax number, and e-mail address of person entered in Block (1).

BLOCK B – AGREEMENT WITH CRAB FEE LIABILITY SUMMARY

Check Yes or No, if you agree with that your Crab Fee Liability Summary represents the actual value of all CR crab received.

If you check YES, and you have not paid on-line, please date and sign your name where designated in Block D, complete Block E, and mail this Fee Submission Form with your payment.

If you check NO, you must complete Attachment A, Crab Fee Calculation Worksheet. You must complete this worksheet even if you have made an on-line payment. After you have completed this worksheet, you must complete Block A through D of this application form and return it with your payment and supporting documentation.

BLOCK C – METHOD OF PAYMENT

Indicate method of Payment:

Personal Check, Cashier's Check, or Money Order. Make payable to National Marine Fisheries Service (NMFS). If you paid using pay.gov, our on-line payment option, mark the box "Payment made On-Line".
(Reminder! Sign your check and if paying for more than one RCR, include all Fee Submission forms.)

Credit Card: Enter type of card, card number, expiration date, printed name on card, and amount of payment.
Signature of credit card holder is required.

BLOCK D – SIGNATURE OF APPLICANT

Print name of registered crab receiver or authorized agent, signature, and date signed.

ATTACHMENT A
CRAB FEE CALCULATION WORKSHEET

RCR Permit Number	Month/Year of Landing	Port Location* (use "AT SEA" for landings delivered to a Stationary Floating Processor)	Fishery	Species	CR Program	CR Pounds	NMFS Calculated Ex-Vessel Price	Actual Ex-Vessel Price	Total
1. Sample	May 2006	Dutch Harbor	BBR	RED	IFQ	5000		\$ 2.20	\$11,000
2.									
3.									
4.									
5.									
6.									
7.									
8.									
9.									
10.									
11.									
12.									
13.									
14.									
15.									
16.									

*Crab harvests processed at sea by a catcher-processor must use standard prices.

17. Ex-vessel Value Total (add lines 2-16):

18. Plus Total Adjustments (retros, bonuses):

19. Subtotal (add line 17 and 18):

20. Fee Liability *(multiply the published fee percentage by line 19):

21. Less Pre-payments or Credits (if any):

22. Balance Due (enter result after subtracting line 21 from 20):

23. Enclosed Payment Amount:

NOTE: (1) You must provide documentation supporting your calculated crab fee liability, if it is different then the amount on your CR Crab Liability Summary. (2) Your fee liability is based on the total value received for CR crab reported under your RCR permit(s). It should represent the total dollar value of CR crab before any deductions are made for goods and services provided (i.e. bait, ice, fuel, repairs, machinery replacement, etc.), multiplied by the NMFS published fee percentage for the CR crab fishing year. (3) Catcher-Processors must use the standard price for all crab harvested and processed at sea.

**ATTACHMENT A
CRAB FEE CALCULATION WORKSHEET**

Complete this block ONLY if you indicated in Block B that you did not agree with your Crab Fee Liability Summary.

2-16. RCR Permit Number: Enter permit number(s).

Month/Year of Landing: Enter date(s) the landing(s) Month/Year.

Port Location: Enter the port(s) where landing(s) was/were made.

Fishery: Enter the CR Crab Fishery in which these crab were harvested.

Species: Enter the crab species (i.e. red, blue, tanner, opilio, etc.)

CR Program: Enter the appropriate CR Program (IFQ, CDQ or Adak)

CR Pounds: Enter the number of CR pounds landed (excluding deadloss, personal use, confiscated pounds or pounds of crab harvested and processed by a CP vessel) on permit(s) for specific date(s).

Standard Ex-Vessel Price: Enter the standard ex-vessel price located on your Crab Fee Liability Summary.

Actual Ex-Vessel Price: Enter the actual ex-vessel price paid for crab accepted under this RCR permit for this landing.

Total: Multiply the total pounds landed on the permit(s) by the standard or actual ex-vessel price to get the total for each landing.

17. Ex-vessel Value Total: Add lines 2 through 16 to get the subtotal of fees owed for all permits.

18. Plus Total Adjustments: Add total adjustments (retros or bonuses paid in previous year).

19. Subtotal: Add lines 17 and 18.

20. Fee Liability: Multiply the permit(s) subtotal (line 19) by the published fee percentage.

21. Less Pre-Payments or Credits: Subtract any pre-payments or credits from line 20. If you have a pre-payment or credit, it will be indicated on your IFQ Fee Liability Summary.

22. Balance Due: This indicates your balance due or credit after subtracting line 21 from 20.

23. Enclosed Payment Amount: If you show a balance, enter the amount of the payment you will be submitting.

Do not forget to sign and enclose your personal or certified check or money order made out to "NMFS" and send it to the U.S. Dept. of Commerce/NOAA, National Marine Fisheries Service, Office of Management and Information (OMI), P.O. Box 21668, Juneau, Alaska 99802-1668. If paying by credit card, make sure ALL requested card information is provided. Do not mail cash.

Remember: You may pay on-line, even if you disagree with your fee liability summary, by logging on at <https://www.fakr.noaa.gov/webapps/crabaccounts/Login>.

We will not be sending receipts for payments received by check or money order, so we strongly recommend that you retain a copy of this completed form and your check/money order for your records. Only payments received by credit card will be sent generated computerized receipts after those payments are processed.

If you need assistance in completing this form, or you have questions about the CR Crab Cost Recovery Program, or any other RAM program, call toll free at (800) 304-4846 (#2) or (907) 586-7202 (#2). RAM's program information, applications, and reports can also be located on the Alaska Region Internet site at www.fakr.noaa.gov.